PATENT

# THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Signature

Applicant

: Steven T. Jaffe, et al.

Application No.: 09/433,730

Filed

: November 3, 1999

Title

DUAL MODE QAM/VSB RECEIVER

Grp./Div.

2634

Examiner

Y. Tse

Docket No.

: 33754/RJP/B600

## REQUEST FOR APPROVAL OF DRAWING CHANGE

Assistant Commissioner for Patents Washington, D.C. 20231

Post Office Box 7068 Pasadena, CA 91109-7068 June 4, 2001

### Commissioner:

In response to the Office action dated January 18, 2001, please amend FIGS. 1, 7 and 10 of the above-identified application as

Enclosed herewith are copies of FIGS. 1, 7 and 10, showing in red the proposed changes. In particular, in FIG. 1 reference sign "10" has been added to designate the analog front end of the dual mode QAM/VSB receiver mentioned on page 19, lines 10-11 of the

### Application No. 09/433,730

specification. In FIG. 7 the summing node "80" is designated. In FIG. 10 reference sign "130" has been added.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

Ву

LeRoy T. Rahn Reg. No. 20,356 626/795-9900

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### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE AMENDMENT TRANSMITTAL LETTER

hereby certify that this correspondence is being deposited with the U.S. Postal Service s first class mail in an envelope addressed to Commissioner of Patents and Trademarks,

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DUAL MODE QAM/VSB RECEIVER

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RECEIVED

JUN 1 3 2001

**Technology Center 2600** 

**Assistant Commissioner for Patents** Washington, D.C. 20231

Post Office Box 7068 Pasadena, CA 91109-7068 June 4, 2001

Enclosed is an amendment to the above-identified application.

		CLAIMS AS	AMENDE	D		
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	104	* 104	0	x \$9.00	x \$18.00	0
Independent Claims	17	** 17	0	x \$40.00	x \$80.00	0
Multiple Dependent Claims ***				\$135.00	\$270.00	0
TOTAL FILING FEE			· · · · · · · · · · · · · · · · · · ·			\$0
NO ADDITIONAL FEE REQUIRED ****	IF NO FEE REQUIRED, INSERT "0"					0

LIST INDEPENDENT CLAIMS: 1, 10, 19, 30, 37, 38, 45, 46, 49, 59, 67, 73, 77, 85, 88, 96 and 101

- \* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3
- \*\* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3
- \*\*\* PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME
- \*\*\* IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON-FEE AMENDMENTS"

Attached is our check for \$ to pay the fees calculated above.

- X A Petition for Extension of Time and the required fee are enclosed.
- X Other enclosures: FIGS. 1, 7 and 10 (proposed drawing corrections)

# Amendment Transmittal Letter Application No. 09/433,730

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A copy of this letter is enclosed.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

LeRoy T. Rahn Reg. No. 20,356 626/795-9900

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